Columbus Civil Service Commission
50 West Gay Street, Room 600
Columbus, Ohio 43215

Position Request

Department: _____   Division: _____

This request is to:

☐   **FILL** a position.

☐   **UPDATE** position duties.

What will be the major responsibility of this position? _____

List the primary duties the position will perform and the associated percentage of time performing the duty:

<u>%</u>   <u>Duty Description:</u>

_____

_____

_____

_____

_____

_____

_____

What is the name and classification of the immediate supervisor of this position?: _____

What is the name and classification of the second level supervisor?: _____

What is the number of employees supervised by this position?: _____

What are the names or position numbers and classification titles of the employee(s) to be supervised by this position?:

_____

What, if any, license/certification is required/preferred to perform the duties of this position?: _____

Is this license/certification required by the class specification? ☐ Yes ☐ No

What equipment will be regularly **OPERATED, MAINTAINED,** and/or **REPAIRED** by this position?:

_____

What software will be regularly used by this position?: _____

I certify that the information contained above is an accurate statement of the major duties and responsibilities of this position. This certification is made with the knowledge that this information will be used to determine the appropriate classification and pay for the position and any false or misleading statements may constitute a violation of City Code.

_____   _____   _____
Originator's Signature   Date   Extension

Please forward this notification to your department/divisional human resources representative for processing.
IOP&P A-14 Issued: 06/03/2002

Position Justification Information

1.   **Why is this creation/reallocation needed?**

   _____

2.   **How will the position be funded?**

   _____

3.   **Comments:**

   _____

To Be Completed By Department/Division Human Resources Office

This request is to:

		CSC Review
☐	**UPDATE** the duties of an existing vacant (or soon to be vacant) position and **FILL** it;	☐ Approved
☐	**REALLOCATE** the class assigned to an existing vacant (or soon to be vacant) position and **FILL** it;	☐ Denied
☐	**CREATE** a new position and **FILL** it;	☐ _____
☐	**REALLOCATE** the class assigned to an existing filled position;	By: _____
☐	**UPDATE** the duties of an existing filled position.	

Position(s) Type: ☐ FT ☐ PT / ☐ R ☐ L ☐ S   -   **Shift:** ☐ 1st ☐ 2nd ☐ 3rd ☐ R   **Location:** _____

Is this a *Temporary* position?   ☐ Yes   ☐ No

Department No.: _____   **Division No.:** _____

Position Number(s): _____

Suggested Class Code: _____   **Class Title:** _____

_____   _____   _____   _____
Human Resources Approval   Date   Appointing Authority Approval   Date: